Complete If Known Comp	FEB 0 9 2004 PS		,							
Check Check Check all that apply FEE CALCULATION (continued) Check Check all that apply Check all that ap	<u> </u>	Complete if Known								
Charge feet(s) indicated below Credit any companyments Credit any companyments Charge feet(s) indicated below Credit any companyments Charge feet(s) indicated below Credit any companyments Credit and continued Credi	for FY 2003									
Effective 0.101/2002. Patient frees are audiptor to arroad evoicion. Applicant claims small entity status. See 37 CFR 1.27. TOTAL AMOUNT OF PAYMENT (S) 770.00				te	-					
Application Columbs System Finity Statutes, See 97-071.27.27.200 Group/Art Unit 2,14 TroTA AMOUNT OF PAYMENT (check all that apply) FEE CALCULATION (continued) 1,200.44 1,2390P7090 PEP 1,200.44 1,24390P7090 PEP 1,200.44 1,24				ned Inv	entor					
TOTAL AMOUNT OF PAYMENT (\$) 770.00 Attorney Docket No. 42390P7090 1241	Applicant claims small entity status. See 37 CFR 1.27.		Examiner Name			Adnan M Mirza	Adnan M Mirza			
METHOD OF PAYMENT (check all that apply) Check										
Check	TOTAL AMOUNT OF PAYMENT (\$) 770	.00	Attorney	Docke	No.	42390P7090 PECEL	<u>生</u> り			
Deposit Account	METHOD OF PAYMENT (check all that apply)				FE	E CALCULATION (continued)	2004			
Deposit Account	E C C Money C - C	3.	ADDITIO	NAL	FEES	1 2 1 2 7	-001			
Deposit Account 02-2666 Cob Fee Fe		يا ا	Large Entity Small Entity			Technology Cer	nter 210			
Account Composit	Deposit Account					_ resulting our	1101 2 19			
Deposit Account Blakely, Sokoloff, Taylor & Zafman LLP 1052 50 2053 130 2053	Deposit 00 000	∞	de (\$)	Code	(\$)	Fee Description F	ee Paid			
Deposit Account Blakely, Sokoloff, Taylor & Zafman LLP 2053 130 2007 1804 2907 1804	Number UZ-2000	•				· · · · · · · · · · · · · · · · · · ·				
The Commissioner is authorized to: (check all that apply) □ Charge fee(s) indicated below □ Credit any overpayments □ Charge sery additional fee(s) required under 37 CFR §5 1.16 1.17, 1.18 and 1.20. □ Charge sery additional fee(s) required under 37 CFR §5 1.16 1.17, 1.18 and 1.20. □ Charge sery additional fee(s) required under 37 CFR §5 1.16 1.17, 1.18 and 1.20. □ Charge series indicated below, except for the filling fee to the above-identified deposit account □ Charge series indicated below, except for the filling fee to the above-identified deposit account □ Charge series indicated below, except for the filling fee to the above-identified deposit account □ Charge series indicated below, except for the filling fee to the above-identified deposit account □ Charge series indicated below, except for the filling fee to the above-identified deposit account □ Charge series indicated below, except for the filling fee to the above-identified deposit account □ Charge series indicated below, except for the filling fee to the above-identified deposit account to the short series in the series of the ser		10:	52 50	2052	25					
Charge fee(s) indicated below Credit any overpayments 1804 920 1804 92	Name Blakely, Sokoloff, Taylor & Zalman LLP	205	53 130	2053	130					
Charge fee(s) indicated below. except for the filling fee to the above-identified deposit account Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account FEE CALCULATION 1252 420 2252 210 Extension for reply within first month 1253 450 Extension for reply within first month 1254 1.480 2254 470 Extension for reply within first month 1254 1.4	The Commissioner is authorized to: (check all that apply)				•					
Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account	Charge fee(s) indicated below Credit any overpayments	180	04 920	1804	920					
Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account 1251 110 1252 420 1255 5 Extension for repty within first month 1252 420 1255 250 1255 210 1255	Charge any additional fee(s) required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.	180	os 1,840°	1805	1,840					
PEE CALCULATION 1252 420 2252 210 Extension for reply within second month		101	. 110	2051	55					
1. BASIC FILING FEE		1								
Large Entity Small Entity Smal		1					— <u> </u>			
Fee				l		Extension for reply within fourth month				
1404 330 2401 165 Notice of Appeal 1402 330 2402 165 Filing a brief in support of an appeal 1402 330 2402 165 Filing a brief in support of an appeal 1403 290 2403 145 Request for oral hearing 1403 2403 145 Request for oral hearing 1403 1403 2403 1403 2403 2403 1403 2403 2403 1403 2403	Fee Fee Fee Fee Description Fee Paid				605	Extension for reply within fifth month				
1002 340 2002 170 Design filing fee 1403 290 2403 145 Request for oral hearing 1403 290 2403 145 Request for oral hearing 1403 290 2403 145 Request for oral hearing 1451 1,510 2452 55 Petition to revive - unavoidable 1451 1,510 1,530 2453 665 Petition to revive - unavoidable 1453 1,330 2453 665 Petition to revive - unavoidable 1453 1,330 2453 665 Petition to revive - unavoidable 1453 1,330 2453 665 Petition to revive - unavoidable 1453 1,330 2453 665 Petition to revive - unavoidable 1453 1,330 2453 665 Petition to revive - unavoidable 1453 1,330 2453 665 Petition to revive - unavoidable 1503 1,330 2453 665 Petition to revive - unavoidable 1503 1,330 2453 665 Petition to revive - unavoidable 1503 1,330 2453 665 Petition to revive - unavoidable 1503 1,330 2453 665 Petition to revive - unavoidable 1503 1,330 2453 665 Petition to revive - unavoidable 1503 1,330 2453 665 Petition to revive - unavoidable 1503 1,330 2453 665 Petition to revive - unavoidable 1503 1,330 2453 665 Petition to revive - unavoidable 1503 1,330 2453 665 Petition to revive - unavoidable 1503 1,330 2453 665 Petition to revive - unavoidable 1503 1,330 2453 665 Petition to revive - unavoidable 1503 1,330 2453 665 Petition to revive - unavoidable 1503 1,330 2453 665 Petition to revive - unavoidable 1,430		140		2401	165	Notice of Appeal				
1003 530 2003 265 Plant filing fee 1403 290 2403 145 Request for oral hearing 1403 2405 2405 2505		140	02 330	2402	165	Filing a brief in support of an appeal				
1004 770 2004 385 Reissue filing fee 1451 1,510 2451 1,510 2451 1,510 2451 1,510 2452 55 Petition to institute a public use proceeding 1452 110 2452 55 Petition to revive - unavoidable 1453 1,330 2453 665 Petition to revive - unintentional 1501 1,330 2501 665 Utility issue fee (or reissue) 1502 480 2502 240 Design issue fee 1503 320 Plant issue fee 1	1 1 1 1 1 1 1 1 1	140	ევ 290	2403	145	Request for oral hearing				
1005 160 2005 80 Provisional filing fee 1452 110 2452 55 Petition to revive - unavoidable 1453 1,330 2453 665 Petition to revive - unintentional 1501 1,330 2501 665 Utility issue fee (or reissue) 1502 480 2502 240 Design issue fee 1503 640 2503 320 Plant issue fee 1503 640 130 Petitions to the Commissioner 1807 50 1807 50 Processing fee under 37 CFR 1.17(q) 1806 180 1806 180 Submission of Information Disclosure Stmt 1807 1807 1808 1808 1809 180		145	51 1,510	2451	1,510	Petition to institute a public use proceeding				
2. EXTRA CLAIM FEES Substitution Substitution		145	52 110	2452	55	Petition to revive - unavoidable				
2. EXTRA CLAIM FEES Extra Claims Fee from below Fee Paid Total Claims	SUBTOTAL (1)	145	53 1,330	2453	665	Petition to revive - unintentional				
Total Claims	SUBTOTAL (1)	150	1,330	2501	665	Utility issue fee (or reissue)				
Total Claims	2. EXTRA CLAIM FEES Extra Fee from	150	02 480	2502	240	Design issue fee				
Table Tabl										
Claims	Independent 20 = X									
Large Entity Small Entity Small Entity	Claims 3X									
Fee				l .						
Code (\$) Code (\$) 1809 770 1809 385 Filing a submission after final rejection (37 CFR § 1.129(a)) 1809		802	21 40	0021	40					
1201 86 2201 43 Independent claims in excess of 3 1810 770 2810 385 For each additional invention to be examined (37 CFR § 1.129(b)) 1203 290 2203 145 Multiple Dependent claim, if not paid 1204 86 2204 43 "Reissue independent claims over original patent 1802 900 1802 900 Request for expedited examination	Code (\$)	180	09 770	1809	385		$-\ $			
1203 290 2203 145 Multiple Dependent claim, if not paid 1204 86 2204 43 **Reissue independent claims over original patent 1801 770 2801 385 Request for Continued Examination (RCE) 770.00 1802 900 1802 900 Request for expedited examination 1801 770 1802 900 90	1202	181	10 770	2810	385					
1204 86 2204 43 **Reissue independent claims over original patent 1802 900 1802 900 Request for expedited examination		4.5.		2024	005	· · · · · · · · · · · · · · · · · · ·	770 00			
	1207 00 12207 10			i		Request for expedited examination				

SUBMITTED BY Complete (if applicable)							
Name (Print/Type)	Lisa Tom	Registration No. (Attorney/Agent)	52,291	Telephone	(503) 684-6200		
Signature	Lan			Date	02/06/04		

Other fee (specify)

* Reduced by Basic Fling Fee Paid

SUBTOTAL (3)

(\$)

770.00

SUBTOTAL (2)

**or number previously paid, if greater, For Reissues, see below

1205

**Reissue claims in excess of 20 and over original patent

(\$)